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## \*BIBDATASHEET\*

CONFIRMATION NO. 4642

Bib Data Sheet

|                             |                                       |              |                        |                                  |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|
| SERIAL NUMBER<br>10/090,064 | FILING DATE<br>03/01/2002<br><br>RULE | CLASS<br>604 | GROUP ART UNIT<br>3763 | ATTORNEY DOCKET NO.<br>595-018-1 |
|-----------------------------|---------------------------------------|--------------|------------------------|----------------------------------|

## APPLICANTS

Leonard Paul, Bloomfield, CT;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/783,060 02/14/2001 PAT 6,555,508  
 which claims benefit of 60/183,307 02/17/2000

ATN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none/ATN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 04/06/2002

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>CT | SHEETS<br>DRAWING<br>4 | TOTAL<br>CLAIMS<br>17 | INDEPENDENT<br>CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials   |                           |                        |                       |                            |

## ADDRESS

27106  
 MELVIN I. STOLTZ, ESQ.  
 51 CHERRY STREET  
 MILFORD, CT  
 06460

## TITLE

Liquid foaming soap compositions and dispensing system therefor

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>612 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |
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